

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:	May 31, 2005					
Estimated average burden						

hours per response. . . . . 16.00

SEC USE ONLY							
Prefix	Serial						
	] :						
DATE RECEIVED							
1	1						

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  HF Commerce Tave Store, Ltd.  Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE  Type of Filing: New Filing Amendment	04038558
A. BASIC IDENTIFICATION DATA	04036336
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  HF Commerce Investors, Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Nu	umber (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone N (if different from Executive Offices)	umber (Including Area Code)
Brief Description of Business	
Investment in Real Estate	PROCES
Type of Business Organization    corporation   limited partnership, already formed   other (please specify):   business trust   limited partnership, to be formed	JUL 23 2004
Month Year  Actual or Estimated Date of Incorporation or Organization: OS WY Actual Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)	FINANCIAL E

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>
• Each general and managing partner of partnership issuers.
Check Box(es) that Apply: A Promoter Beneficial Owner Executive Officer Director General and/or
Full Name (Last name first, if individual)  Managing Partner
8 214 Westches a Ste 500, 14/11s, 1x 75225
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
LAMBERT, Kichard
Business or Residence Address (Number and Street, City, State, Zip Code)  5950 Barks Rive, Suite 200, Dellas, TX 75225
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Full Name (Last name first, if individual)  375 (apttol) Texase Highway South, Sk. 148, Audm  Business or Residence Address (Number and Street City State 7 in Code)
Business or Residence Address (Number and Street, City, State, Zip Code)  TX. 48404
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Managing Partner
Full Name (Last name first, if individual)
11551 Forest Central Dr Juste 200 Dally Tx 75243
Business or Residence Address (Number and Street, City. State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code)

				B. IN	FORMATI	ON ABOUT	OFFERI	N <b>G</b>			70.5	
1. Has the	issuer sold	, or does th			l, to non-ac				_	······································	Yes 💢	No
2. What is	the minim	um investm			• •		-				s_2	<u>5</u> aco
	-	permit joint		_							Yes 🔀	No
commis If a pers or state	ssion or sim son to be lis s, list the na	ion request ilar remuner ted is an ass ime of the bi you may se	ration for se ociated per roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok ore than five	ers in conne er or dealer (5) person	ction with registered s to be list	sales of sec with the Sl ed are assoc	urities in th EC and/or	ne offering. with a state		
Full Name (				+ 1	. 4 16	0/1	C.					
Business or	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip tode)		-n (		· 1 -1	7,	#24/
Name of As	sociated Br			Capi	1701 17	1 guilley	) ou	./h, U4	146 139	, Tust	n, K	78 707
					0.11							
States in W		Listed Has " or check					*****************	,				States
AL	ĀK	AZ	ĀR	हिस्त	[CO]	[CT]	DE	[DC]	FL	GA	THIT!	[ID]
TL	IN	IA	KS	KŸ	LA	ME	MD	MA	MI	MN	MS	MO
MT RI	NE SC	NV SD	NH TN	NJ DX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	WY	PR
						——————————————————————————————————————						
Full Name (	Last name	first, if indi	vidual)									
Business o	r Residence	Address (N	Number an	d Street, C	City, State,	Zip Code)						
Name of As	ssociated B	roker or De	aler		<del></del>							
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers			<del></del>			
(Check	"All State	s" or check	individual	States)				***************************************	• • • • • • • • • • • • • • • • • • • •		All	States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]
IL MT	NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (	Number an	d Street. C	City, State,	Zip Code)						
Name of A	ssociated B	roker or De	aler								•	
States in W	hich Person	Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers					<del>`</del>	
(Check	c "All State	s" or check	individual	States)	·····	••••••••					☐ Al	l States
AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	H	
IL MT	IN NE	TA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{\overline{\mathbf{w}}}\overline{\mathbf{v}}$	WI	$\overline{WY}$	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	S	\$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		\$ 175,000
	Other (Specify)	. ,	\$
	Total	2,180,000	\$ 175,000
	Answer also in Appendix, Column 3, if filing under ULOE.	*	~ <u></u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	3	\$ 105,000
	Non-accredited Investors	2	\$ 70,000
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$ 2,000
	Printing and Engraving Costs		\$ 35,000
	Accounting Fees		` <b>\$</b>
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$ 218,000
	Other Expenses (identify) Promotor's Claimed Expenses Der ordering Wenwarden		s 38,000
	Total		s 293,000

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	3	s 1,887,00
<b>5</b> .	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		•
	Salaries and fees (includes amounts paid out as Expense unler (.4.a.)	Payments to Officers, Directors, & Affiliates	Payments to Others
	Purchase of real estate		□ <b>\$</b>
	Purchase, rental or leasing and installation of machinery and equipment	_ ,	
	Construction or leasing of plant buildings and facilities	 	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	<u> </u>	
	Repayment of indebtedness	\$	<b>S</b>
	Working capital	<b>\$</b>	<b>\$</b>
	Other (specify):	<b>\$</b>	
			· 
	Column Totals	S/, 962, 000	
	Total Payments Listed (column totals added)	□ s_4	962,00
	D. FEDERAL SIGNATURE		
sig the Iss	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commit information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of uer (Print or Type)  From exce  Signature	e is filed under Ru ssion, upon writte	le 505, the following
	me of Signer (Print or Type)  Evan Mary Land For Grand Pather  Title of Signer (Print or Type)  Atry - un fat for Grand Pather		
	Y		

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No.
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is f. D (17 CFR 239.500) at such times as required by state law.	iled a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informat issuer to offerees.	ion furn	iished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be ent limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of establishing that these conditions have been satisfied.		
The issu	er has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beha	lf by the	undersigned

duly authorized person.	/ () (	
Issuer (Print or Type) HF Commerce Thusboy, L.J.	Signature	Date 6/14/04
Name (Print or Type)	Title (Print or Type)	
Leonal Mash's	Atry-w-tack for beach letter	
•	<b>)</b>	

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

		ang paggilang 18 Sept Fill Street		AP	PENDIX					
1	Intend to non-a investor	2 I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	All tul	Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL							 			
AK										
ΑZ										
AR										
CA	$\times$		11 Jatures 11	3	105,000	5	70,000			
со										
СТ										
DE										
DC										
FL										
GA										
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ME										
MD								``		
MA										
MI										
MN										
MS										

		Sec.				APP	ENDIX	Agrant Company			
1	Intend to non-a investor (Part B	ccreo s in S	dited State		Type of security and aggregate offering price offered in state (Part C-Item 1)	( dista	Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	1	No			Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО				1							
MT				Ц							
NE											
NV			$\bot$								
NH			$\perp$								
NJ											
NM											
NY											
NC									!		
ND			$\Lambda$								
ОН											
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VT										,	
VA											
WA											
WV											
WI				1							
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				APP	ENDIX				·美洲。	
1	to non-a	2 I to sell eccredited s in State	Type of security and aggregate offering price offered in state	Type of investor and amount purchased in State					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	(Part B	No	(Part C-Item 1)	Number of Accredited Investors	(Part	C-Item 2)  Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										